Chris Lavy reports on a new Christian orthopaedic hospital in Malawi

PLUGGING A HUGE GAP

alawi is a small, landlocked and very poor country in central Africa. It has been in the world news a lot recently. There has been a severe famine, but it has enormous needs in many other areas. It is estimated that there are 50,000 people who need elective orthopaedic surgery. It has a road accident rate that is ten times that of the UK. It has a chronic shortage of doctors. In 1998 there was only one orthopaedic surgeon in Malawi. Now there are four, which is a great increase, but it is still only one per three million. For the same population of twelve million, UK for example would have about 300 orthopaedic surgeons.

Something new

A new hospital has just been opened in Blantyre, the second city, which houses the ten year-old Malawi College of Medicine. The hospital was financed by a generous grant from the Beit Trust in UK and is run by CURE International, a Christian medical

charity. It is called the Beit Trust CURE International Orthopaedic Hospital (thankfully this mouthful has already been shortened to 'BTCI'). It has 75 beds and two operating theatres. It takes both adults and children but concentrates on elective reconstructive surgery in children, as this is such a needy group. Poor children are treated at no charge but there is a small eightroomed private wing giving treatment to richer patients to help cover costs. The medical director is Mr Jim Harrison FRCS(Orth), a CMF member from Newcastle, and the project director is Mr Arthur Aseka, an experienced hospital manager from Kenya. Both Arthur and Jim have come to Malawi specifically to run the hospital, bringing with them their wives Edna and Gail and a total of five children between them. They have been joined by Richard Brueton, an orthopaedic surgeon from St Thomas' and Guy's in London, and his wife Valerie.

The caseload for the hospital is varied, but the common diagnoses include club feet, angular deformities such as bow legs and knock knees, malunited and ununited fractures, osteomyelitis, septic arthritis and TB of the spine. A leg lengthening/bone transport service will be set up and arthroscopy, hip and knee replacement will be available.

Widespread Links

We do not want the hospital to be an isolated institution. We will be doing our best to link with, support, and encourage other healthcare and training institutions. The hospital has joined with the College of Medicine in the training of undergraduates and will form the cornerstone of a new postgraduate orthopaedic training scheme that is about to start. There is a library and research room



The BCTI Orthopaedic Hospital in Blantyre



Young girl with bow legs due to Blounts disease, before and after surgery

set up by a generous grant from the Wishbone Trust UK and the orthopaedic department of Carlisle hospital. The hospital has two full time surgeons who both spend a day each week at the local government hospital in order to cement good relationships with the Ministry of Health and to help with the trauma load that fills the government hospital's orthopaedic beds.

Linkages outside Malawi will also be encouraged. Elective medical students and orthopaedic specialist registrars will be able to spend time seeing cases they rarely find in UK, learning a new health culture, and learning that there are many countries of the world where health services have to run on 1% of the NHS's resources.

Training Programmes

In addition to the undergraduate and postgraduate surgical training mentioned, the hospital will be the base for a training programme for orthopaedic clinical officers (OCOs). This is a group of paramedical clinicians that are unique to Malawi and have

developed because of a longstanding lack of doctors in the country. They are trained in basic conservative fracture and injury management but have essential operative skills for emergency techniques. These include debriding open fractures and draining septic joints. Some 14 OCOs are trained each year and they are the backbone of the country's orthopaedic service. Most of them work in isolated district hospitals where there is only one doctor, who is often away. Surgeons from the new hospital will make regular visits to districts to support and encourage OCOs, to help them with their own cases and to see any referrals to the new hospital for more complex surgery.

Spiritual Ministry

BTCI hospital will strive to be an efficient and well-run hospital with as high clinical standards as possible. It will also be distinctively Christian in that the message of God's love will be at the very heart of the hospital. Each day will start with prayers. A hospital chaplaincy team is available to talk to any patient or guardian who wants to know more about the good news of Jesus Christ and his offer of new life. They will do this with great courtesy and respect in a multi-faith country with increasing Muslim influence.

Chris Lavy works in Malawi for CBM International. He is honorary professor of orthopaedic surgery at the University of Malawi, and chairman of the board of the BTCI hospital. His wife Vicky, a GP by training, is currently setting up a palliative care service for children, and is chairman of the Malawi CMF.